

UNITED STATES DISTRICT COURT FOR THE DISTRICT OF MONTANA

TRANSCRIPT ORDER FORM

Use one form per court reporter

Please read instructions on next page

1. ATTORNEY NAME MICHAEL DONAHOE	2. PHONE NUMBER 406-449-8381	3. EMAIL ADDRESS (for transcript delivery) ashley_ulsher@fd.org					
4. MAILING ADDRESS (including law firm name, if applicable) FEDERAL DEFENDERS OF MONTANA 50 W. 14TH STREET, SUITE 1 HELENA, MT 59624		5. NAME & ROLE OF PARTY REPRESENTED: If not a party, use non-party request form. MICHAEL BLAKE DeFRANCE, DEFENDENT					
		6. CASE NAME UNITED STATES v. MICHAEL BLAKE DeFRANCE					
		7. DISTRICT COURT CASE NUMBER CR 21-29-M-DLC					
8. COURT REPORTER NAME: Use a separate form for each court reporter. JOANN CORSON		9. COURT OF APPEALS CASE NUMBER (if applicable)					
10. THIS TRANSCRIPT ORDER IS FOR:							
<input type="radio"/> APPEAL <input checked="" type="radio"/> NON-APPEAL		<input type="checkbox"/> CJA <input type="checkbox"/> IN FORMA PAUPERIS (court order attached)					
11. TRANSCRIPT REQUESTED: For each transcript requested, please specify the date of the proceeding, the proceeding or partial proceeding requested, the transcript format, and the delivery time. Financial arrangements must be made with the court reporter before transcript is prepared.							
DATE	PROCEEDING If requesting a partial proceeding, specify portion (e.g., witness or time).	PAPER Full Size	PAPER A-Z Word Index	E-MAIL PDF	E-MAIL ASCII	E-MAIL A-Z Word Index	DELIVERY TIME
2/23/2022	MOTION HEARING	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	30-day
		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	30-day
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		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	30-day
12. ADDITIONAL COMMENTS, INSTRUCTIONS, QUESTIONS, ETC:							
13. SIGNATURE s/ MICHAEL DONAHOE				14. DATE 2/24/2022			